FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB Approval			
OMB Number: 3235-0076			
Expires: November 30, 2001			
Estimated average burden			
nours per response 16.00	}		

SEC US	E ONLY
Prefix	Serial
DATE RE	CEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change Offering of Common Shares	e.)
Filing Under (Check box(es) that apply): □ Rule 504 □ Rule 505 ☒ Rule 506 □ Section 1	on 4(6) ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DAT 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Ascend Offshore Fund, Ltd.	04039893
Address of Executive Offices (Number and Street, City, State, Zip Code) c/o Bison Financial Services Limited, Bison Ct., P.O. Box 3460, Road Town, Tortola, BVI	Telephone Number (Including Area Code) (284) 494-5239
Address of Principal Business Operations (Number and Street, Gity, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Private Investment Company	
Type of Business Organization	
• • • • • • • • • • • • • • • • • • • •	other (please specify): onal business company formed under laws of BVI
	ear 0 Actual PROCESSED for State:
CN for Canada; FN for other foreign jurisdiction)	EN AUC OD 2004
GENERAL INSTRUCTIONS	7 TION TO 1
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6).	r Section 4(6), 17 CFR 230.501 et seq. or 13 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, in due, on the date it was mailed by United States registered or certified mail to that address.	notice is deemed filed with the U.S. Securities and freceived at that address after the date on which it is
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	signed. Any copies not manually signed must be

Filing Fee: There is no federal filing fee.

with the SEC.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice consistues a part of this notice and must be completed.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. versely, failure to file the appropriate federal notice will not result in a loss of an available \$\frac{9}{4}taf tion unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMD control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	⊠ D	irector	☐General and/or Managing Partner
Full Name (Last name first, Cook, Graham	if individual)					
Business or Residence Addre c/o Bison Financial Services				Virgin Is	slands	
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	⊠ D	irector	☐General and/or Managing Partner
Full Name (Last name first, i Fairbairn, Malcolm Paul	f individual)				 _	· · · · · · · · · · · · · · · · · · ·
Business or Residence Addre 600 Montgomery Street - 37t			de)	`		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	⊠ Di	irector	☐General and/or Managing Partner
Full Name (Last name first, i Morrison, Ernest A.	f individual)					
Business or Residence Addre Milner House, 18 Parliament	ss (Number and S Street, Hamilton l	treet, City, State, Zip Coo HMFX, Bermuda	ie)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Di	rector	☐General and/or Managing Partner
Full Name (Last name first, if	f individual)					
Business or Residence Addres	ss (Number and St	reet, City, State, Zip Coo	le)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Diı	rector	☐General and/or Managing Partner
Full Name (Last name first, if	findividual)					
Business or Residence Addres	ss (Number and St	reet, City, State, Zip Cod	le)		•	
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Dir	rector	☐General and/or Managing Partner
Full Name (Last name first, if	individual)					
Business or Residence Addres	ss (Number and St	reet, City, State, Zip Cod	e)			
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Dir	ector	☐General and/or Managing Partner
Full Name (Last name first, if	individual)					·
Business or Residence Addres	s (Number and St	reet, City, State, Zip Cod	e)			

	Yes	No
1. Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering?		×
Answer also in Appendix, Column 2, if filing under ULOE.		
2. What is the minimum investment that will be accepted from any individual?	\$500,00	0*
	Yes	No
3. Does the offering permit joint ownership of a single unit?	凶	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC		
and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.		
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)		
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] (OK] [OR] [PA]		
[RI] [SC] [SD] [TN] [TX] [UT] [VA] [WA] [WV] [WI] [WY] [PR]		
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
Check "All States" or check individual States)		
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[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]		
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]		
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		-, -
tates in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
Check "All States" or check individual States)		
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]		
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [OH] [OK] [OR] [PA]		
[RI] (SC) (SD] [TN] [TX) (UT) [VT] (VA) [WA] [WV] [WI] [WY] [PR]		,
(Use blank sheet, or copy and use additional coopies of this sheet, as necessary)		
*minimum subject to waiver by general partner 3 of 8		

B. INFORMATION ABOUT OFFERING

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the column below the amounts of the securities offered for exchange and already exchanged.		
fered for exchange and already exchanged. Type of Security	· A composto	A manuat A langed
	Aggregate Offering Price	Amount Alread Sold
Debt	\$ <u>-0-</u>	\$ <u>-0-</u>
Equity	\$ 500,000,000*	<u>\$ 16,657,014</u>
☑ Common ☐ Preferred		
Convertible Securities (including warrants)	\$-0-	\$ <u>-0-</u>
Partnership Interests	\$-0-	<u>\$-0-</u>
Other (Specify)	\$-0-	§ -0-
Total	\$ 500,000,000*	§ 16,657,014
Answer also in Appendix, Column 3, if filing under ULOE		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
#	Number Investors	Aggregate Dollar Amount
Accredited Investors.	46	of Purchases § 16,657,014
	-0-	\$-0-
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 4, if filing under ULOE		Φ
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
Type of offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees	🗖	\$0-
Printing and Engraving Costs	🛮	\$1,000
Legal Fees		\$19,000
Accounting Fees		\$0-
Engineering Fees	🗆	\$0-
Sales Commissions (Specify finder's fees separately)	🗖	\$0-
Other Expenses (identify) Filing fees	🗵	\$_5,000
Total	🛛	\$ 25,000

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Question I and total expenses furnished is the "adjusted gross proceeds to the Indicate below the amount of the adjusted used for each of the purposes shown. If an estimate and check the box to the le must equal the adjusted gross proceeds	pregate offering price given in response to Part C- in response to Part C-Question 4.a. This difference issuer." I gross proceeds to the issuer used or proposed to be the amount for any purpose is not known, furnish ft of the estimate. The total of the payments listed to the issuer set forth in response to Part C-Ques-	\$ 499, 97	5,000*
tion 4.b. above.		Payments to Officers, Directors, & Affiliates	Payments To Others
Salarias and face		\$-0- □	^
		S-0-	*
	rallation of machinery and equipment	\$-0-	s -0-
	uildings and facilities		s <u>-0-</u>
	cluding the value of securities involved in this	<u> </u>	,
offering that may be used in exchar	nge for the assets or securities of another issuer	\$ <u>-0-</u>	s <u>-0-</u>
Repayment of indebtedness		\$0-	\$ -0-
Working capital		S-0-	\$ -0-
Other (specify) investment capital		\$ <u>-0-</u> 🗷	\$ 499,965,000*
registration costs		s <u>-0-</u> ⊠	\$ 10,000
Column Totals		\$ <u>-0-</u> 🗵	s 499,975,000*
Total Payments Listed (column to	otals added)	⊠ \$ <u>4</u> 9	99,975,000*
	D. FEDERAL SIGNATURE		
ollowing signature constitutes an undertak	signed by the undersigned duly authorized person. I ing by the issuer to furnish to the U.S. Securities ar by the issuer to any non-accredited investor pursua	nd Exchange Comm	ilssion, upon written
ssucr (Print or Type)	Signature	Date	
Ascend Offshore Fund, Ltd.	Mula	67.30	2004
Name of Signer (Print or Type)	Title of Signer (Print or Type)		· · · · · · · · · · · · · · · · · · ·
Malcolm P. Fairbaim	Director DORAFOCIO MONAQUA	_	
			,

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS.

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

* The Issuer is offering an unlimited amount of common shares.

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The Issuer does not expect to sell in excess of \$500,000,000 in common shares. Actual sales may be significantly lower.